

National INAD Program

Advanced Sign-up and Information Sheet For Calendar Year 2011

Note: This is a non-binding preliminary sign-up form to accelerate the preparation of FDA submittals and permanent files at the National INAD Office/AADAP. Final confirmation of this information will be obtained prior to invoicing and submission of enrollment data to FDA.

Agency/Company: _____
Facility: _____
Mailing Address: _____
FedEx Address: _____
Investigator: _____ **e-mail:** _____
Phone: _____ **Fax:** _____

Current NPDES Permit Number: _____

Monitor: _____ **e-mail:** _____
Phone: _____ **Fax:** _____
Mailing Address: _____
FedEx Address: _____

Billing Information: I verify that the above-described facility would like to sign-up to participate in the National INAD Program. The total number of INADs that this facility would like to sign-up for at this time is _____, at \$400 per INAD. If a facility has not previously participated in the National INAD Program, please include a one-time start-up charge of \$100. The total to be billed to this facility is \$_____. Invoices will be mailed out the end of January 2011.

General Information:

1. The Investigator and Monitor can not be the same person. Investigators are responsible for conduct of studies and complete and accurate data collection. Study Monitors are responsible for supervision of the trials, adherence of the Investigator to the Study Protocol, and inspection of the site.
2. FDA and the appropriate drug sponsors will be notified of your facility's participation.
3. INAD study protocols, forms, and general INAD information can be found on the AADAP website located at <http://www.fws.gov/fisheries/aadap/home.htm>.

INAD Compounds that this Facility is Interested in Participating under in 2011, Including Fish Species and Number of Fish to be Treated for Each INAD: (Instructions: In the space provided below please place an “X” in either the “yes” or “no” column for each INAD listed. If an INAD is selected (“X” in yes column), please list the species to be treated and the maximum number of each species to be treated in the appropriate columns).

INAD Compound	Yes	No	Fish Species (common/scientific name)	Max. Number Treated
1. Chloramine-T (BGD & external flavobacteriosis)				
Halamid® or Actamide INAD 9321				
2. Oxytetracycline - feed-additive (therapeutant/feed mark)				
Terramycin® 200 for Fish INAD 9332				
3. Oxytetracycline - feed-additive (marine shrimp only; therapeutant)				
Terramycin® 200 for Fish INAD 8069				
4. Florfenicol medicated feed (therapeutant)				
Aquaflor® INAD 10-697				
5. Diquat (BGD & external flavobacteriosis)				
Reward® INAD 10-969				
6. Oxytetracycline – immersion (therapeutant)				
Oxytetracycline Hydrochloride INAD 9033				
7. Oxytetracycline – bath mark				
Oxytetracycline Hydrochloride INAD 9033				
8. Calcein – immersion mark				
SE-MARK® INAD 10-987				
9. Luteinizing hormone-releasing hormone – spawning aid				
LHRHa INAD 8061				

Drug Approved
INAD no longer available

INAD Compound	Yes	No	Fish Species (common/scientific name)	Max. Number Treated
10. sGnRHa (salmon gonadotropin releasing hormone; spawning aid) Ovaplant® INAD 11-375				
11. CCP (spawning aid) Common Carp Pituitary INAD 8391				
12. CP (spawning aid) Channel Catfish Pituitary INAD 11-468				
13. H₂O₂ (hydrogen peroxide; external parasites) 35% PEROX-AID® INAD 11-669				
14. eugenol (anesthetic) Aqui-S®E INAD 11-741				
15. benzocaine (anesthetic) Benzoak® INAD 11-740				
16. emamectin benzoate (external parasites) SLICE® INAD 11-370				

Please fax, email, or mail completed Sign-up Forms by 12/31/10 to:

Ms. Bonnie Johnson
AADAP Office
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Bozeman, MT 59715

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Fax: (406) 582-0242